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ESSAY ON CUPPING

BY

CHARLES KENNEDY, SURGEON.

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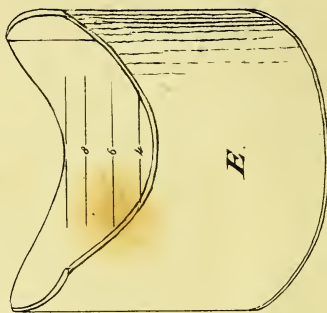
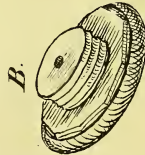
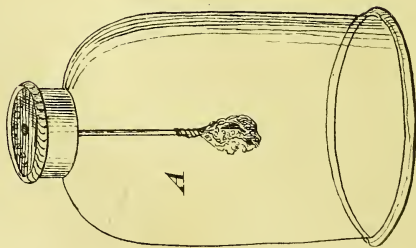




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Kennedy's Patent Cupping Apparatus.



AN

# ESSAY ON CUPPING,

ETC. ETC.

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By CHARLES KENNEDY, SURGEON.

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THE HISTORY OF THE

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TO

SIR JAMES M'GREGOR, M. D. F. R. S.

PHYSICIAN EXTRAORDINARY TO THE KING,  
DIRECTOR GENERAL OF THE ARMY MEDICAL BOARD,  
ETC. ETC. ETC.

THIS ESSAY

AND THE

IMPROVEMENTS ON THE CUPPING APPARATUS

ARE, BY PERMISSION,

RESPECTFULLY INSCRIBED,

BY HIS OBLIGED AND HUMBLE SERVANT,

THE AUTHOR.

Virginia Terrace, Great Dover Road.  
February 25th, 1826.



## P R E F A C E.

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THE author's object in bringing the following Essay before the public is, to contribute his mite to advance the utility of an operation, which has long been recommended by the profession, and practically performed by others. It is undoubtedly a surgical operation, and its practice ought not to be separated from that of the profession.

The observations on the different diseases may not be unacceptable to the junior prac-

titioner. It was the author's intention to have referred to the respective works of those, who, in their writings on these diseases, have recommended cupping; but he has found it to be so generally advised that it would have been a considerable waste of time and trouble to have inserted their remarks, and might have led him into discussions which would have unnecessarily increased the extent and price of the work. Those who are already acquainted with this subject may receive but little information from the present treatise; but should those who have not had opportunities of witnessing the curative powers of cupping glean from it any advantage, the intention of the undertaking will be amply fulfilled.

The description and utility of the patent will hereafter be more fully discussed. In taking

it out, he has perhaps been too much influenced by the encomium of friends, which he ought to have remembered might be partial ; but it is the approbation of the public that must decide upon this, as on every other invention, whether it shall be deserving of their patronage. The author respectfully claims that attention which is due to those who use their best efforts, however humble they may be, for the benefit of mankind.



## DESCRIPTION OF THE PLATE.

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- A. The Cupping Glass.
- B. The large Screw.
- C. The small Screw.
- D. The Sponge.
- E. The graduated Cupping Receiver.





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# ESSAY ON CUPPING.

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## CHAPTER I.

### *Of the Apparatus used for Cupping.*

THE Art of Cupping has been so well known, and the benefits arising from it so long experienced, that it is quite unnecessary to bring forward testimonials in favour of what has received not only the approbation of modern times, but also the sanction of the remotest antiquity. Some writers on this branch of medical practice have been fanciful enough to suppose that man borrowed his

knowledge of the benefit of abstracting blood in many cases from a part of the brute creation, which are said to perform by instinct an operation of the kind upon themselves. But without entering into any discussion on the subject, we may give man the credit to suppose that he might have learned the lesson from that operation which nature herself performs, when, from an overdistention or congestion, the vessels of the head and other parts are amply relieved by an effusion from the nostrils, &c., and from that capability of understanding with which he is endowed so as to enable him to comprehend whence that relief arose. However, as far almost as we have any records remaining, we find that means have been adopted for the benefit of man in this respect very similar to what we now possess. Bleeding from the arm was extensively practised

by the ancients, and cupping was as well known and perhaps better appreciated by them than it is by the moderns, and though their operations might be rude, and some of their theories erroneous, yet it is not for us to pass by contemptuously the opinions of the earlier professors of our art. The progress made in science and medicine has not been effected by the means of a single mind, but by the combination of splendid talents and great genius for centuries. It may still be in the recollection of many persons now living, when apparatus as clumsy, and operations as needless as ever were performed by the ancients, were daily practised in our hospitals, though happily a system has now been introduced which we can scarcely conceive susceptible of much improvement. To return from this digression : among the Egyptians, from whom blood-letting was

introduced into Greece, cupping was the usual remedy for almost every disorder ; and they no doubt had received it from the more ancient nations of the East, from whom they had derived their other knowledge\*. The mode of the operation, also, with the exception of the *materiel* of the instruments employed by the ancients, and others of the eastern nations, is described in terms very similar to those used by writers among us at the present day. The savage very early perceives the advantages arising from a topical loss of blood, and contrives the easiest means of effecting it, and some at this day perform it as described by Celsus ; first, by sucking the blood through a horn placed on the part to be scarified, and

\* For a curious note on “ The Learning of the Egyptians,” see the Poem of De Clifford, p. 403, published by Pickering, Chancery Lane.

then, in like manner drawing it after such scarification. This was looked upon as a better means of obtaining the wished for relief: nor can it excite surprise, when we consider the danger that arises from too great a loss of blood, which they had not sufficient knowledge of the art to guard against, or to prevent, as the advantages derived from the study of anatomy were unknown to them. Even in this enlightened age we find many persons have an insuperable objection to the losing of blood, and we ought not to forget that the loss of the greatest Poet of his day has been ascribed to this very circumstance.

In many cases topical abstraction of blood alone is indicated, and the lancet of course is of no avail, as this can only be effected by leeches or cupping. Leeches have been found so uncertain in their application, that various

means have been prescribed to make them take effect, but we are too often baffled in our expectations, after using every method which ingenuity could suggest ; and even after they have taken hold, we are again in another dilemma as to the quantity of blood we are likely to obtain by their means. Dr. J. R. Johnson in his work on the “ History of the Leech,” has taken no notice of this important subject, but in a monthly journal\* the following curious particulars are communicated ; and it would have been more satisfactory had the author also taken note of the time the leeches were on, and how long the blood continued to flow after their removal.

“ A leech, weighing three drachms, took three drachms one scruple.

\* Gazette of Health, January, 1826.



“ The blood which afterward escaped from the puncture amounted to three drachms and a half.

“ A leech, weighing two drachms, took two drachms ten grains.

“ Blood escaped afterward about two drachms and a half.

“ A leech, weighing one drachm ten grains, took one drachm ten grains.

“ The blood escaped afterward from the puncture about one drachm.

“ A leech, weighing half a drachm, took thirty grains.

“ Blood escaped afterward from the puncture about thirty grains.

“ The leeches were weighed immediately before they were applied, and again immediately after their removal. The bleeding from the punctures was encouraged by warm water, in the usual way.

“ The difference in the quantity of blood abstracted by twenty-four *large* leeches and the same number of small ones, is upwards of *seventeen ounces*, twenty-four large leeches taking away twenty ounces and a half, and twenty-four small ones only three ounces !”

The difference being so great, it is evident that the operation of cupping will be found a more efficacious method of abstracting blood whenever it can be applied, but unfortunately a very common prejudice has long existed against it, which may with reason be attributed to the frequent accidents occurring from the awkward means employed. These indeed have been so extremely objectionable that nothing could have kept it in practice, but the excellence of the remedy, and the *occasional* dexterity of the operator. Too many surgeons, however (men of undoubted

ability), from a disinclination or reluctance to inflict the unavoidable pain it occasioned their patients, have refused to perform the operation, and consigned it to persons in whose hands it has fallen into unmerited disrepute. This was the natural consequence of the faulty manner in which it was obliged to be performed, and was only to be remedied by rendering the operation so simple as to require little dexterity on the part of the operator, and no apprehension on that of the patient, whose comfort ought above all things to be considered. During my acquaintance with the profession I have too frequently had to regret the inadequacy of the instruments used in cupping, to the advantages that ought to have resulted from the remedy. I have often seen patients shrink from the operation which was most desirable in their cases, and

even when submitted to, found myself, with every precaution, at times unable to perform it without causing unnecessary pain, and considerable apprehension. For the above reason many surgeons have declined the practice of cupping, and hence has arisen a neglect of the operation, so that it is now seldom thought of as a part of medical education, and scarcely even as a necessary part of medical knowledge.

Not a public teacher in London makes mention of it in his lectures, and there are many young men who have gone through a five years' apprenticeship, who have, as it is termed, walked the Hospitals, and actually entered on the career of their profession, without ever having seen this operation performed\*.

\* To some it may appear a very trivial observation, yet I will venture to express an opinion, that, if any

I trust, therefore, my reader will give me his attention while I recapitulate in a very summary manner the means which have been hitherto employed in cupping, and the improvements I have ventured to suggest, which I beg leave to mention have for their particular object the convenience of the army, the navy, and the country practitioner ; for I can hardly suppose that those who have for a number of years practised the former methods in which they have acquired superior dexterity, will adopt any other. Nor is it to the general practitioner a matter of small concern ; in the

person properly qualified were to give during the season a short course of two or three familiar and *practical* lectures on this operation, the measure would be attended with the most beneficial results. It is at present too much neglected, and the attention of students ought to be more directed to it, especially if intended for service abroad.

metropolis, and in some of the larger towns of the kingdom, they may perhaps easily find persons who profess this art, but in remote districts and especially in our extensive colonies, the neglect or ignorance of this operation may be attended with the most serious consequences, and therefore it is the part of every one to perform a public duty, by inculcating the propriety of obtaining a knowledge which can be so easily acquired, and which is in many cases so absolutely necessary.

#### CUCURBITULA, OR CUPPING GLASSES.

These were formerly made of brass, horn, glass, wood, clay, gold, or silver, and still earlier the gourd, from whence arose the appellation Cucurbitula. Latterly, however, glass has had the preference, from the circumstance of

that article being much lighter in itself, and from its allowing the practitioner to observe the progress of the operation. The shape of the glass has been altered from time to time, and even now we have them of various constructions. In order to rarefy the air in the glass, so as to allow its drawing blood freely to the parts to be scarified ; it was (and is even now) practised by throwing into it a piece of lighted tow or paper, or by introducing a torch for a few seconds, certainly a more rational method ; by the former means the tow or paper, by the quick motion required to keep out the surrounding air, was thrown upon the skin of the patient, and by scorching him gave him no small distaste for what he was afterwards to undergo. But abler operators prefer the latter mode of introducing the torch or spirit lamp, which in



inexperienced hands has the same objection : indeed in particular cases, as on the temples, where the hair is near, it is almost impossible with the greatest dexterity to prevent the patient from feeling the effects of the fire, and consequently suffering much, at least in apprehension.

Another method of procuring a vacuum, which might at first sight be better approved, has long been in use, viz. by the exhausting syringe attached to the glass; but as the valves, &c. are apt to get out of order, they have not come into general practice, and have only been revived either by caprice or fashion. Taking advantage of this apparatus, a M. Demour of Paris has added to it a set of spear-pointed lancets, to produce the scarification without the removal of the glass. Mr. Weiss



too has an instrument of the kind, but these are complicated in their structure, and I do not know what good can possibly accrue from their use. There are others which have been suggested by the ingenuity of artists, but it is unnecessary for me further to particularise them ; they are so liable to accidents, and so difficult to be repaired, that hitherto notwithstanding its inferiority in other respects, many surgeons have persevered in the old course, trusting to their own dexterity and the resignation of their patients. The new glasses, however, which I present to the public are neither complicated in their structure nor difficult in their application, and, by their extreme simplicity, will render the operation so easy that almost any tyro in the profession will be able to use them with dexterity, and in the absence of the surgeon, in urgent cases

can apply them, and thus render himself useful to his master. The shape of the glass itself is but little altered; instead of the narrow rim of some of the older glasses, I have adopted a more rounded shape, to avoid, if possible, the ill consequences which attended the older ones when applied to inflamed or irritable parts, exciting considerable pain by their sharp pressure on the skin, and frequently cutting off the communication of the vessels external to the glass, and consequently preventing a flow of blood, particularly where there is little cellular substance, or muscle; as over bony parts, and on the temples, where especially a great flow of blood is frequently required. But the principal difference in the Patent Cupping Glass (see plate) is the screw B attached to the top of the glass, and made air-tight by means of a piece of leather. To

this screw is attached another, C, a little more than an inch long, at the end of which is a piece of sponge D ; this having been dipped in spirits of wine, and the whole screwed into its proper place, is charged for the operation ; and unless blood should be thrown into contact with the sponge, there will be no further occasion during the operation to take off the screw. You then introduce the wax-taper and ignite the spirit, which will produce the required vacuum, upon instantly applying it to the part required.

The most casual observer will see the advantage of this glass ; no unnecessary heat, no hurrying is required,—the patient cannot be cauterised as by the old system, and thus every advantage is obtained which the old glasses possessed, and all the objections to

which they were liable are removed. After the vessels of the part are sufficiently distended for the scarification, which will be in about a minute or two, the screw is to be gently turned, and the air rushing in will allow the glass to be taken off without any trouble to the operator, or pain to the patient. Here, therefore, is an important advantage gained, for by the older glasses, if the torch introduced had had its desired effect, it became so fixed to the skin, that it was always with difficulty, and never without pain, removed. To persons, therefore, of delicate nerves, and ladies especially, this simplifying the operation will render it much less, if at all to be dreaded; and I will venture to say, that in moderately careful hands, by using the above glasses and the other part of the apparatus, which I shall now proceed to describe,

the fears of the operation of cupping, now but too just and too general, need no longer be entertained ; and it will be found to be much preferable to the application of leeches.

### SCARIFICATOR.

To accomplish the scarification, it was early performed by the means of some sharp instrument frequently applied to the body, till superior ingenuity constructed an instrument to accomplish the object at one and the same time. This instrument, being so well known, it is unnecessary for me to describe it further, than as a box containing a set of 10, 12, or 16 lancets\*, which are ejected by a spring, and which are shortened or elongated by a screw

\* For general practice, however, an instrument containing 10 lancets will be found amply sufficient.

fixed to the top. These lancets, in the instrument constructed on the old principle, are fixed in the box, so that a considerable difficulty is experienced to keep them clean. If this circumstance be not attended to, the country practitioner will frequently find them upon an emergency so dull and often so rusty, as to be very dangerous in their use, causing a lacerated wound, which does not unfrequently terminate in suppuration, as well as defeating the intention of the operation. But an instrument lately invented, and known by the name of Fuller's or Weiss's improved Scarificator, has happily removed this important objection to cupping. The improvement consists in the lancets cutting in opposite directions, *i. e.* from right to left, and *vice versa*, thus antagonizing each other. The pivot may also be taken out and the lancets

cleaned much easier than in the old instrument, and a relay of them is generally included in the box, in case of accident to the others; and is of great importance to the army and navy surgeons. But yet the lancets are so constructed that they are with difficulty removed, and few surgeons can make that use of them, which the inventor first intended; I therefore think they are still susceptible of improvement, which however I leave to be perfected by others more capable of effecting it than myself.

#### THE GRADUATED CUPPING RECEIVER.

This is a vessel made of metal: the shape of the mouth is a semicircle, formed to receive that of the glass, and graduated for the convenience of ascertaining the quantity of blood



drawn\*. On the removal of the old glasses, the finger is inserted on the upper part, the mouth is turned upward, and the blood taken away in the glass. In most cases, and especially by those who are not in the daily habit of using this instrument, the linen is most liable to be soiled; but by the graduated cupping receiver this inconvenience is removed, for by placing it under the glass, and allowing the blood to be removed by it, no particle of linen can be soiled; and those who never saw the operation performed, by attending to the directions given, need not fear the occurrence of this accident.

\* See Plate.



## CHAPTER II.

### *Of the Operation of Cupping.*

CUPPING, like other surgical operations, requires a little dexterity in its management; even venesection is frequently performed in an awkward and painful manner. Youths, on their first entrance into the profession, are too often left to the resource of their own genius to handle the lancet; as it is imagined so simple as to require no particular notice: thus arises the difference, so frequently noticed by patients, of one practitioner bleeding much

easier than another\*. To attain that dexterity which is so highly necessary in cupping, advantage should be taken of opportunities, which frequently occur in practice, where trials of this nature may be made without detriment to the patient, or injury to the reputation of the surgeon. By this means, an expertness sufficient to carry it into effect may shortly be acquired, which will prove of considerable advantage to the surgeon in after practice. I shall now proceed to describe a few general rules, and offer some practical hints, which I hope may be of service to the junior practitioner.

Three methods have been proposed to solicit blood to the surface, where there is sluggishness or want of due circulation in the ex-

\* See Appendix on bleeding.

treme vessels, viz. by friction, fomentation, and the warm bath. I would advise all beginners to adopt one of these, as they will most assuredly assist them in obtaining a greater flow of blood, to obtain which a little time is never ill spent; but I would most particularly recommend the warm bath, as I think the faintness produced has a very good effect upon the patient; and provided the blood has been drawn freely, a reaction will take place, which is seldom observed in simple cupping. The best effect is produced if the patient is cupped whilst in the bath. Besides the cupping apparatus, the following articles will be required for the operation: wash-hand basin, warm water, lighted wax taper, wine-glass, small basin, and napkins. The first step will be to prepare and apply the glasses, take out the large screw at the top, dip the

sponge into the rectified spirits, and returning it tight into its place, approach the patient with the glass in the left hand held obliquely, and the lighted taper in the right : when you are near to the part selected for operation, ignite the sponge and place the glass gently on the skin ; the flame in the glass cannot come in contact with the skin, and will be extinguished in two or three seconds. The skin and cellular substance will now be seen rising in the glass, of which it will occupy about one third. The *modus operandi* of the cupping glass depends upon the pressure of the atmosphere, which is equal all over the body \*, and where a portion of it is removed, as by the rarefaction

\* The body of a middle sized person contains a surface of about 10 square feet, so that the atmospheric pressure upon the human body is not less than 20,000 pounds.

of the air under the glass, a vacuum in a greater or less degree is formed; the blood rushing to the part distends the vessels, causes a tumefaction, and a degree of pain to be experienced. To remove the glass, turn the screw, the air rushing in will allow it to fall off gently into the hand; apply it again by lighting the sponge as before, and let it remain on a minute or two, during which time take off the chill of the scarificator by rubbing it in the palm of the hand; then turn the screw, hold the glass in the left hand, carry the scarificator under the glass, and spring it on the tumor *before you allow it time to subside*. This is the only part of the operation that requires any particular dexterity, and may very easily be acquired: if the nurse, or any one near, be allowed to turn the screw, by taking hold of the glass yourself, and keeping

the scarificator ready in the hand, this part may be a little more expedited. When this is done, and the screw of the glass made tight, apply it as before, and the blood will be seen flowing into it. As soon as a sufficient quantity of blood is procured, or when coagulation is beginning to take place, remove the glass immediately, or the operation will be defeated by the coagulum stopping up the mouths of the capillaries. On removing the glass, place the *Graduated cupping receiver* under it, lift the glass upwards, and let the blood descend into the receiver ; bathe the part with flannel, wrung out of hot water ; and if the sponge is not touched by the blood, apply the glasses immediately, but should the sponge be soiled, take the one in reserve, and wash the other, so as to have it in readiness for another application. The quantity of blood taken by

each glass will average about 33. Proceed in this manner till the quantity required is drawn ; and after the operation is over, wash the part carefully from all coagulated particles, and apply either the adhesive plaster or the common white ointment spread upon linen to the wounds.

Failure in obtaining blood may be attributed to some one of the following causes, each of which, however trivial they may appear, require particular attention. First, The want of due circulation in the extreme vessels, which has already been considered at the commencement of this chapter. Second, The lancets may be set too deep, or not deep enough : in the first case, the fat will be seen protruding through the incisions, which will compress the bleeding mouths of



the capillaries ; or if the incisions are too superficial, no blood can be obtained ; therefore a nicety in setting the lancets is absolutely necessary. For ordinary occasions, let the lancets be about one quarter of an inch deep ; but for the temples, and other parts sparingly supplied with muscle or cellular substance, about one-seventh part of an inch will suffice : there is, however, a considerable difference in the skin of different individuals ; no very precise rule can therefore possibly be laid down, and the operator must observe well the effects of the first application, and regulate his after proceedings to the best of his judgment. Third, If the lancets be not kept clean, or the edges are allowed to become dull, a bruise is caused by the velocity with which they are propelled through the skin, instead of a clean incision, in which case also little or no blood



will flow. It is obvious that due attention must be paid to the clean state of the lancets after every operation, which may be done by rubbing them with a piece of soft leather, and afterwards oiling them by the means of a feather. Fourth, The exhaustion of the air under the glass may be carried too far, which will have the effect of making the fat protrude and stop the bleeding; this is easily rectified in the patent glasses by turning the screw very gently, and returning it quickly if the blood is seen to begin to flow. Fifth, The vacuum may not be sufficiently complete, when it will be advisable to remove the glass; if the screw be perfectly air-tight, light the sponge, and hold it over the part for two or three seconds, and then apply it with gentle pressure.

Let the position of the patient be such that the graduated receiver may be readily placed

under the glass, that the blood may gravitate into it. The glass also should be made to incline a little, to prevent coagulation taking place, which would be occasioned by its remaining on the incisions; the neglect of this precaution is indeed often detrimental to the operation.

A small surface only of the body of the patient must be exposed, sufficient for the application of the glasses, and after they are on, the parts must immediately be covered by the blanket, to prevent him from feeling the effects of the weather if it should happen to be cold. Let a piece of flannel also be interposed between the graduated receiver and the part to which it is to be applied, to prevent the chill which it would otherwise occasion.

## CHAPTER III.

### *Of Diseases which require the Application of the Cupping Glass.*

THE efficacy of bleeding in acute as well as chronic diseases is so manifest, that I hardly suppose it necessary for me to enter into a disquisition of its merits. When judiciously employed it seldom fails to stop inflammation in its incipient stages, or palliate those symptoms of disease which are less under the control of the physician. The plan of abstracting blood by means of the cupping glass and scarificator has many advantages

in practice, over the uncertain application of leeches where particular effects are required. If, as is the case in many disorders, our object be to induce syncope, to relieve the congestive state of the blood, we take it *pleno rivo*. In these cases, also, we shall find that the cupping glasses, emptying the capillaries in a shorter time, will sooner and more effectually relieve the patient than the tardy flow of blood from a whole host of leeches. To enter into the minute pathology of disease, their symptoms or general treatment would far exceed the limits and intentions of this work: I shall content myself with endeavouring to point out to the young practitioner and the student, a few of those disorders in which he will find cupping most beneficial.

## APOPLEXY.

Previous to an attack of apoplexy, the patient feels more or less those premonitory symptoms which have been noticed by very early writers on medical practice, and which, if properly attended to, might be the means of averting the dreadful consequences attendant upon their neglect. These symptoms are a dull heavy pain in the head, giddiness on stooping, throbbing of the temporal arteries, ringing in the ears, loss of memory, excessive drowsiness, &c. If any of these symptoms occur in a patient who has the apoplectic form, viz. a large head, short thick neck, florid complexion, broad shoulders, short stature, with an inclination to corpulency, and

also to those advanced in years, we should lose no time in recommending abstraction of blood as the only means of relief: an occasional application of the cupping glass in the more moderate cases will be sufficient, but when the patient has already had one attack, or if he be of a full plethoric habit, blood at the same time must be taken from the arm.

By having early recourse to these means, the attack may be kept off for a considerable period. During the state of coma, the cupping glasses and scarificator are to be applied to the temples, the napè of the neck, or between the shoulders; upwards of 100 ounces of blood have been taken in the course of four days by this means.

## PALSY.

The symptoms denoting the approach of palsy are, numbness of the side, or extreimity, which is about to be the seat of the disorder, pricking, and sometimes heat of the skin, sense of creeping, impaired judgment, and other enumerated under apoplexy; palsy is often the precursor of genuine apoplexy, and in its treatment the practitioner ought particularly to keep this in view. Bleeding from the arm is scarcely admissible, unless the patient is of a plethoric habit, and decided symptoms of compression of the brain appear. From the seasonable application of the cupping glasses we can alone expect to derive advantage; and blood to the amount of 16 or 20 ounces must be taken either from the temples or nape of the neck.

## HYSTERIA AND EPILEPSY.

Venesection is seldom practised in Hysteria, except in young and plethoric subjects, in which cases good has arisen from its use ; cupping will be found more advisable, especially where it has been of long standing. In epilepsy, the most effectual relief is obtained by the application of the cupping glass to the nape of the neck or back.

## MANIA.

In some of the milder stages of mania, or aberration of the mind, periodical cupping is of considerable advantage : many lunatics appear conscious of the benefit to be derived from it, as it is not an uncommon thing for them to express a wish to have that operation



repeated. Where maniacal symptoms arise in the progress of other complaints also, good will be derived by the abstraction of blood by cupping.

#### FEVER IN GENERAL.

In the early stages of some fevers, cupping might be resorted to with advantage, rather than the indiscriminate use of leeches or the lancet; by them the strength of the patient is frequently reduced to a greater degree than the benefit obtained will warrant, which is not the case by this operation. The debility occasioned by leeches is excessive, as I can testify from experience, and should by no means be persisted in; the strength of the patient, too, must be sparingly reduced by the hand of the surgeon, when it is considered how much the vital powers fail even in a short

attack of fever. My reader must not, however, suppose, that I would in all cases object to run the hazard of occasioning even considerable debility; I have been taught to place my faith in the lancet, and the lancet alone; for “to anticipate danger (says an excellent author) we must bleed generally as well as locally, and our bleedings must be executed under the impression of affording not temporary merely, but radical relief\*.”

#### INFLAMMATIONS.

The propriety of venesection in cases of inflammation has been generally admitted as well as practised; but cupping, though

\* Sandwith on Fever, p. 104. I take this opportunity of respectfully expressing my obligations to this able practitioner, whose judgment and pathological researches in fever are well known.

undoubtedly a powerful auxiliary, has been, comparatively speaking, altogether omitted. To this neglect, the frequent relapses, and sometimes fatal termination of diseases, may, without exceeding the limits of probability, be justly ascribed.

#### INFLAMMATION OF THE BRAIN.

Very active depletion is required in this disease. The cupping glass must not be neglected, for on the local depletion the success of the issue will often depend. In headaches, arising from a determination of blood to the head, known by the throbbing of the temporal arteries, and suffusion of the eyes; relief will be obtained by the loss of a few ounces of blood from the nape of the neck, by cupping.

## INFLAMMATION OF THE EYES.

Local bleeding will frequently be found to relieve the turgescence of the vessels of the eye; and I believe cupping is now generally preferred, by oculists, to the application of leeches: the external inflammation they are apt to induce is sometimes very considerable; and I have seen cases where erysipelas succeeded their use, and especially one of a gentleman who died in consequence. The parts where the glass may be applied are, the temples, nape of the neck, or between the shoulders.

## PNEUMONIC INFLAMMATION, PULMONARY CONSUMPTION, HEMOPTYSIS OR SPITTING OF BLOOD, &amp;c.

Under this section may be included all

those diseases, the primary origin of which is in the respiratory organs, in which the occasional abstraction of blood by cupping, to about 10 ounces, will be found of infinite service, and in most cases will alleviate considerably the distressing symptoms of oppression and dyspnœa.

#### INFLAMMATION OF THE LIVER.

In no disease, perhaps, are the advantages of local abstraction of blood more conspicuous than in those of this organ, provided it be employed before disorganization has taken place. More active employment of it in Hepatic affections of the East would, I have no doubt, be the means of checking this disease, which is unfortunately so destructive to the constitutions of those who reside there.

## GOUT AND RHEUMATISM.

In the inflammatory stages, cupping is frequently applied, and more particularly advised where congestion of the vessels of the head or internal organs is indicated, and by some practitioners is preferred to the lancet.

## CHOLERA MORBUS.

This terrible malady, which has so long and so severely visited our eastern territories, attacking equally all classes of society, has of late aroused the attention of our medical writers, and awakened a spirit of inquiry, which it is to be hoped will eventually prove of service to those whose destination it is to be exposed to its dangers. For it, depletion

has been recommended, and practised with the greatest success, though it is to be regretted that, with such facts before their eyes, there should still be found practitioners who, either from prejudice or other causes as much to be deprecated, are loath to give up the contrary opinion, which in theory is bad, and in practice has produced nothing but disappointment and failure. “I have thought it right (says Mr. Annesley) to discuss thus fully the advantages of bleeding, because I know there is among many of the profession in India a very great prejudice against it\*.” In this scientific work, the author strongly recommends bleeding by leeches to a very great extent, and refers to them constantly, as if they were at all times to be procured in an

\* Diseases of India, by J. Annesley, Esq., p. 175.

inexhaustible supply, and always at hand in every emergency. This, however, cannot be expected to be the case in some of the severe seasons, when Cholera is more generally prevalent. Our astonishment, therefore, must be great when we find that Mr. Annesley has not once in his work mentioned or hinted at the advantages to be derived from the use of the Cupping Apparatus. Surely this is only to be accounted for by supposing he had not seen it in frequent operation ; and this neglect therefore can only be ascribed to what I have already submitted as an evil to my readers,—the little attention hitherto paid to this operation as a necessary part of medical knowledge.

Cupping, it is obvious, must be highly advantageous, for reasons previously stated, as well as one more powerful, viz. *economy*. I



will suggest it, therefore, as the most effectual remedy, not only for this disease, but others incidental to tropical climates ; and it would be well, on this ground, if the ruling authorities were to give strict orders for due attention to be paid to an operation so generally neglected, by which many valuable lives would, I am convinced, be spared.

There are many other diseases in which cupping is applicable, but these I need not enumerate, as they will readily occur to the practitioner. I would however observe, that the curative process of the cupping glass has not hitherto received that attention which it deserves ; and it might more generally be used for other purposes beside that of obtaining blood, by what is generally known by the term, Dry Cupping.

Dr. Barry has lately drawn the attention of the profession to this subject, and employed the glass successfully in arresting the absorption of poison applied to the surface of the body. His experiments, indeed, are so conclusive, that we may almost hope we have at length procured a remedy for that most distressing complaint, Hydrophobia\*. This suggestion ought to receive due attention at this season of the year, when accidents from rabid animals are the most to be apprehended, especially as all other remedies yet prescribed have failed. On the early application of the

\* This discovery is of very ancient date, and to which Dr. Barry lays no claim; but the originality of the theory lately advanced by our countryman cannot be questioned, and reflects great honour upon him. His work, now in the press, will illustrate some phenomena in the animal economy at present imperfectly understood.

glass will depend much the success of the operation ; for after the virus shall have been admitted into the system little good can be expected, though in one of Dr. B.'s experiments the glass was not applied till the expiration of three quarters of an hour after the poison was introduced, and the life of the animal saved may encourage us to try the remedy. The glass must be kept applied for six or eight hours at the least, in which the surgeon can be assisted by any intelligent humane person, if the patent cupping glass is used, as it is very readily applied, and that without much dexterity. The part may occasionally be washed with a little cold water, and the glass quickly applied\*.

\* Any communication on this subject will be most thankfully received by the author.

I take the liberty of inserting the following from the Medico Chirurgical Review for April, as the particulars are not only curious but highly instructive.

“ The employment of natural suction, for the extraction of poison from wounds, is a practice of very ancient date, as is well known. Dr. Barry has lately revived this practice in Paris, making use of cupping glasses instead of the living mouth. M. Laennec has presented a report to the Royal Academy of Medicine, on Dr. Barry’s experiments, and the results appear to be very important as well as curious. We shall glance at some of these experiments. In the first place, powdered strychnine was applied to a wound, and then a cupping glass was exhausted over

it. The effects of the poison were prevented. If taken off, the poison would begin to work, and when reapplied, these consequences would be again suspended. Similar experiments were made with white arsenic, the upas tiente, and prussic acid. Eight grains of arsenic were introduced into a wound made in the thigh of a dog. Three quarters of an hour afterwards the glass was applied, and kept exhausted for four hours. The dog experienced no inconvenience. Another dog was similarly treated, but no glass applied, and the animal died in fifteen hours. Six drops of prussic acid were infused into a small wound in the thigh of a rabbit. The glass was immediately applied, and kept so for twelve minutes. The animal felt no bad effects. The glass was removed, and quickly the rabbit was seized with convulsions and was supposed to be

dying. The reapplication of the glass was soon followed by a restoration of the pristine state of the animal. After twelve minutes the glass was again removed, and the convulsions and other bad symptoms soon reappeared and required the third application of the exhauster. The rabbit could not dispense with the glass till after half an hour from the introduction of the poison. The same process was instituted on another rabbit, but without the exhauster. The animal died in two minutes. Experiments of a similar kind were made with the upas tiente, and with analogous results. It appears evident that the cupping glass prevents the poison from finding its way into the system, and that thus the process may be of considerable importance in the healing art.”—*Rev. Medicafe.*

“ P. S. More recently Dr. Barry has read a memoir on this subject before the Medico-Chirurgical Society of London, which excited long discussions during two sittings of the Society. The evidences of the efficacy of cupping glasses in preventing the absorption of poisons were irresistible, and the opinion of the Society was unanimous respecting the merits of Dr. Barry’s experiments. It has been proved lately in France, that the bites of vipers, both on man and inferior animals, were rendered entirely harmless by the application of cupping glasses.”—*Medico Chirurgical Review, April.*

The cupping glass when exhausted over an indolent ulcer is known to procure healthy granulations, and is recommended by some to promote resolution in deep-seated inflamma-



tion, on the same principle as the application of blisters. I have seen it useful, I think, in an obstinate case of suppressed menstruation. There is still a wide field open for inquiry; and the new theory advanced by Dr. Barry and other French physiologists on absorption will, it is to be hoped, make us acquainted with many processes in the animal economy hitherto unnoticed.



## APPENDIX.

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Mittere autem sanguinem cum sit expeditissimum, usum habenti; tamen ignaro difficillimum est.

*Celsus, lib. 2. cap. 10.*

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BLEEDING, or, as it is sometimes termed, phlebotomy, is now generally performed either from the arm, or the external jugular vein. When from the temporal artery or its branches, it is termed arteriotomy. To bleed from the arm, a fillet or bandage is to be bound rather tight around it half way up the os humeri;

this is done to prevent the blood from flowing to the heart, by which means also, the vessels are distended and made conspicuous, and the blood made to flow more freely. The finger is then to be pressed into the bend of the arm, to discover the pulsation of the artery, and if a vein be situated above, avoid puncturing it, if possible. Select the vein which rolls the least under the finger, and if it is one rather deeper situated, it may be opened much better than another more superficial. The thumb of the left hand is to be placed upon the vein just below where the opening is to be made, to prevent its slipping from under the lancet. Put the lancet at right angles with its sheath, take it between the thumb and fore-finger of the right hand, and gently push it into the vein, in an oblique direction; when a little within the cavity, push

it forwards and upwards still obliquely, which movement will bring it out again. Some cases require larger openings to be made, to obtain syncope without a great loss of the vital fluid : this may be done by pushing the lancet when in the vein a little more obliquely forwards and upwards. The patient is then directed to take hold of any thing most convenient, to open and grasp his hand, that by the play of the muscles the blood may flow freely, but this will not be required, if the incision is properly made, or unless the circulation is languid.

After the quantity required is drawn, the finger and thumb of the left hand are to be placed above and below the wound ; the fillet is to be removed, the arm washed, and a pledget of lint, or linen, is to be placed over

the wound, the lips of which must be made to meet: pass the bandage round the elbow in the figure of 8 shape, the crossing to come just above the pledget. The upright posture favours syncope, and should be adopted if the state of the patient will allow. In ordinary bleeding, if the patient complains of a very great degree of faintness, a few drops of the *spiritus ammoniæ aromaticus* or the *spiritus lavendulæ compositus* may be administered in a little water, or he may recline on the sofa for a few moments.

In this country the external jugular vein is more frequently opened in children than in adults. A little difficulty is sometimes experienced by the child throwing itself into awkward positions: it may therefore be opened in the most convenient situation; place the

thumb of the left hand upon the vein, a little below where the opening is to be made, push the lancet obliquely upwards, stop the bleeding first by gentle pressure, and after put upon the wound a pledget of lint, which is to be kept down by small strips of adhesive plaister.

The temporal artery or its branches may be opened in the same manner as a vein, but should it be deeply seated, a small incision must first be made direct over it, and the lancet afterwards carried into the vessel. The hemorrhage may be stopped by pressure or by cutting it completely across to make it retract.

If any preference is given to lancets, the spear shape has the advantage, as it can be made more easily to glide into and dilate a vein or artery. Clean the instrument care-

fully after every operation, by rubbing it with a soft piece of linen, first upon one half of the sheath and then upon the other.

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SINCE preparing these pages for the press, I have seen a notice in the London Medical Journal, for the present month (April), of an improvement suggested by Mr. Clark, in the cupping glass. This is to insert into the glass a small piece of silver, which by its elasticity is made to remain on the top: to this is suspended a piece of sponge by means of a small silver wire, and is obviously intended to remove the difficulties (already commented on) experienced by those unaccustomed to perform the operation, and in whose hands it frequently fails for want of that dexterity which (by former methods) can only be ac-

quired and retained by practice. It would scarcely become me to make any remark whatever on this contrivance, so much resembling, as it does, one which I have long adopted in my private practice, viz. of fixing a card to the top of the glass, to which the piece of lighted paper was to be attached, and which even in my opinion would be superior to Mr. Clark's suggestion, as a card may always be procured, and would not occasion the trouble and cleaning required by that gentleman's method. Several instances of my having employed this means might be easily adduced if required, but the following communication from my respected friend Mr. Collier may suffice.

“ 20, Norfolk Street, Strand.  
17 April, 1826.

“ DEAR SIR,

“I have not the slightest hesitation in answering your question, as to the fact of



your having been cupped in the month of August, 1825, when under my care, for a severe attack of pneumonia, on the principle then suggested by you, and since by Mr. Clark. The card was moistened by strong spirits of wine, and fixed by its own elasticity, instead of using the silver wire, and I should imagine the superiority of your subsequent invention will be acknowledged universally, as well by that gentleman, as by the profession at large.

“ Yours truly,

“ G. F. COLLIER.”

So simple however did this contrivance appear, that I did not think it worthy of being published, until, by further consideration, I could entertain the hope, as I trust I may now do, of having rendered it so far complete as to merit public attention. This therefore I



beg respectfully now to solicit, and claim that right to the originality of the invention to which by a practice of some years, and the accomplishment of a *more complete* apparatus, I am justly entitled.

I hope these few observations may be allowed me, as without them, I might be exposed to the imputation of having only adopted the invention of another.

THE END.

